

Madison County
Application for Volunteer Boards and Advisory Committees

Date: _____ Name of Board you are applying for _____

Name: _____

Address: _____

Daytime Phone: _____ Evening Phone: _____

Fax Number: _____ e-mail: _____

Are you a resident of Madison County? _____

Describe the reasons you are interested in this position _____

Describe any background, experience, and interests that you have which may assist you in performing the responsibilities of this appointment:

Occupation _____

Education _____

Experience _____

(Please attach a detailed resume if desired)

Have you served on any previous boards or in any governmental positions in the past? _____

If yes, what were they? _____

Are you available for night meetings? _____

Are you available for daytime meetings? _____

Do you foresee any potential conflicts of interest that you might have in executing the duties of this appointed position? _____

If a conflict of interest arose for you, how would you deal with it as an appointed member of this board? _____

Signature: _____

Please sign and return completed application to the Madison County Commissioners Office. It can be returned in person, by mail (PO Box 278, Virginia City MT 59755), by fax (406-843-5517), or by email (madco@madison.mt.gov).